
INTRODUCTION TO THE MASSACHUSETTS GUIDELINES FOR ADULT DIABETES CARE

Both national studies and state data indicate that people with diabetes do not receive recommended levels of preventive care, leaving wide gaps between current recommendations and actual practice. The Massachusetts Guidelines for Adult Diabetes Care were developed as an opportunity to improve diabetes care in the state. The Guidelines highlight and summarize essential components of quality diabetes management, and offer accompanying tools for use in the primary care setting. These guidelines are not intended to replace the clinical judgement of primary care providers, nor are they intended to preclude more extensive evaluation and management of the patient by other specialists as needed.

The Guidelines were developed by a Work Group convened by the Massachusetts Department of Public Health Diabetes Prevention and Control Program and its Advisory Board. The Work Group was comprised of clinicians, representatives from Managed Care Organizations, the Division of Medical Assistance, the Massachusetts League of Community Health Centers, the Massachusetts Medical Society, and MassPRO. Their recommendations were incorporated into the final version. The Guidelines are reviewed and revised on a regular basis.

The Guidelines are a cooperative effort among many partners. This unique collaboration eliminates the confusion brought about by slight differences in guidelines developed by each managed care organization. These guidelines, though based on the ADA's Clinical Practice Recommendations, are not intended to serve as a description of benefits or coverage; coverage may vary by insurer.

Diagnosis and Classification of Diabetes Mellitus

New recommendations for the diagnosis, screening, and classification of diabetes were developed in 1997 by an international Expert Committee working under the sponsorship of the American Diabetes Association. The report's recommendations have been accepted and are supported by the American Diabetes Association, the Division of Diabetes Translation of the Centers for Disease Control and Prevention, and the National Institute of Diabetes and Digestive and Kidney Diseases of the National Institutes of Health.

Guidelines for Adult Diabetes Care (laminated summary)

This summary of the Guidelines highlights basic medical care for people with diabetes. We suggest you post them in each exam room as a reminder of recommendations for care.

Diabetes Medications

This provides an overview of oral diabetes medications and insulin, including information on dosage, onset, duration, drug interactions, and contraindications. The section on treatment approach principles provides information to assist with treatment decision-making in type 2 diabetes. A new chart comparing various oral antidiabetic agents is located on the reverse side of the insulin page.

Flow Sheet for Diabetes Care

The flow sheet reflects the recommendations found on the Guidelines for Adult Diabetes Care laminated summary. It can be copied or modified for use in your practice and included in patients' charts. Diabetes medications, exams, and test results can be documented over time to track diabetes management.

Cardiovascular Risk Reduction Guidelines

Adults with diabetes are two to four times more likely to have coronary heart disease than those without diabetes. Treatment of diabetic dyslipidemia is critical, as is the prevention and treatment of other cardiovascular risk factors such as high blood pressure, excess weight, smoking, and lack of physical activity. These guidelines contain summaries of cholesterol lowering therapy, ACE inhibitor therapy, and aspirin use, as well as a smoking intervention model.

Hypertension

Hypertension contributes to the development and progression of chronic complications of diabetes. Aggressive treatment of even mild-to-moderate hypertension is beneficial. This guideline includes information on progressive goals for hypertension management.

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Diabetic Nephropathy Guidelines

Diabetes is the leading cause of end-stage renal disease, accounting for about 40% of new cases. Intensive diabetes therapy can significantly reduce the risk of the development of microalbuminuria and overt nephropathy in people with diabetes. Annual screening for microalbuminuria will allow early identification of patients with nephropathy. Improving glycemic control, aggressive antihypertensive treatment, and the use of ACE inhibitors will slow the progression of nephropathy. These guidelines contain information on screening for albuminuria and hypertension control.

Smoking Intervention Model

This tool provides a staged format for counseling patients who smoke.

Foot Inspection and Monofilament Use Guide

Foot ulcers and amputations are a major cause of morbidity, disability, and expense for people with diabetes. Early recognition and management of risk factors for ulcers and amputations can delay the onset of these adverse outcomes. This guide highlights key points of the foot exam and monofilament test.

Medical Nutrition Therapy and Diabetes Self-Management Training Summary

Medical nutrition therapy and diabetes self-management training are integral to successful diabetes care and management. This provides the person with diabetes with the knowledge and skills to perform self-care on a day-to-day basis to achieve and maintain optimal glucose control. Numerous studies have demonstrated that self-management training leads to reductions in costs associated with diabetes. This summary lists topics to include in both basic and continuing education for medical nutrition therapy and diabetes self-management training.

Determining Body Mass Index (BMI)

Obesity substantially raises the risk of morbidity from type 2 diabetes and other diseases. The BMI describes relative weight for height and is significantly correlated with total body fat content. The BMI may be used to assess overweight and obesity and to monitor changes in body weight.

Diabetes Care Card (patient wallet card)

The Diabetes Care Card allows people with diabetes to track their diabetes care and personal goals. The wallet card has space to record test results and services received over four visits. Encourage your patients to bring this card to each office visit.

Diabetes Resources

This information may now be found on the Massachusetts Department of Public Health web site
www.state.ma.us/dph/fch/diabetes

References

References for both the guidelines and supporting materials are provided.

For additional copies of either the Guidelines or the Diabetes Care Card, order directly from the Massachusetts Health Promotion Clearinghouse website www.maclearinghouse.com

Electronic copies of all Guidelines materials as well as patient education materials and “The Burden of Diabetes in Massachusetts” are available on The Massachusetts Department of Public Health web site
www.state.ma.us/dph/fch/diabetes

If you have questions about the Guidelines, please call the Massachusetts Diabetes Prevention and Control Program at (617) 624-5070.